Root Cause for Need	SMART Goal	Priority Area	Action Steps		Assessment/ Evaluation
See question 8.2 in Demonstration of Need	*What are you trying to achieve?*		*Activities or Services*	*Frequency of Activity or Service(s)*	*How will you know you were successful?*
This should be a need and root cause reflective of question 8.2 on your evaluation.	*This section should consist of the state goal you are addressing and the local goal you are proposing.*	*This section should define the priority area within the state goal that you intend to address with your local goal.*	*This section should describe the specific activity or service that will address the identified root cause of the established need.*	*This section should provide a timeline and frequency of the activities or services identified in the previous column.*	*This should provide the information or metrics you will use to determine whether you have made progress toward addressing the root cause.*

Example

Root Cause for Need	SMART Goal	Priority Area	Action Steps		Assessment/ Evaluation
Need Students with Individualized Education Plans (IEPs) are not participating in Out-of-School Time (OST) services. **Root Cause** OST staff do not have skills necessary to properly support students with IEPs.	**State Goal 1** Safe and Supportive Environment **Local SMART Goal** The Nita M. Lowey 21st CCLC (21st CCLC) program at our school will provide a safe, supportive environment for students for a minimum of 140 days during the school year.	**Priority Area #1** Quality Staff **Priority Area #2** Professional Development (PD) related to students with IEPs.	**Activity** Will provide training in Positive Behavioral Interventions and Supports (PBIS), collaborate with district and school special education staff to develop a PD plan for OST staff, provide staff mentoring and coaching.	**Frequency** In-depth training will occur monthly, with weekly check-ins to review progress and implementation. Mentoring and coaching will take place on an on-going basis throughout the course of the school year.	**Evaluation** A combination of training attendance records and training agendas will show that 100% of after school program staff have participated in PBIS training and coaching at least twice throughout the year.

Workspace

Root Cause for Need	SMART Goal	Priority Area	Action Steps		Assessment/ Evaluation
Need	**SMART Goal**	**Priority Area #1**	**Activity**		**Evaluation**
Root Cause		**Priority Area #2**	**Frequency**		

Resource Needs (partners, staff, fiscal, etc.)